

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

AETNA LIFE INSURANCE CO.,

Plaintiff,

VS.

**HUMBLE SURGICAL HOSPITAL
LLC,**

Defendant.

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CIVIL ACTION

NO. 4:12-cv-1206

**AETNA'S NOTICE OF ANOTHER ALLEGED
FRAUD BY HUMBLE'S CEO AND OWNER**

1. Aetna files this notice regarding another alleged fraud committed by Humble Surgical Hospital's CEO and majority owner, Dr. Mustapha Kibirige.

2. As the Court is aware, on June 3, 2015, the United States Department of Justice filed a False Claims Act suit against Outreach Diagnostic Clinic LLP and its owner Dr. Kibirige for alleged Medicare fraud.¹

3. The DOJ accuses Dr. Kibirige of conspiring with Outreach Diagnostic Clinic LLP and others to perform standard glaucoma-screening eye-pressure tests on Medicare patients while charging Medicare for special eye-pressure tests, known as tonography, that were never actually performed.

¹ See Exhibit A, LAW360, Texas Eye Clinic Hit with FCA Suit Over Medicare Billing (June 4, 2015); see also Exhibit B, Amended Complaint, *United States ex rel. Michael Sorensen v. Outreach Diagnostic Clinic LLP, et al.*, No. 4:12-cv-00480 (S.D. Tex. Jun. 3, 2015), ECF No. 36 (Hughes, J.).

4. According to the DOJ, Dr. Kibirige and the other defendants knowingly and continuously billed Medicare for reimbursement of tonography tests despite the fact that they never owned or operated the equipment needed to perform such services. The DOJ further accuses Dr. Kibirige of allegedly starting the false billing scheme and later directing his staff to continue charging Medicare falsely for tonography tests on all Medicare patients.

5. As the Court is also aware, Aetna sued Humble Surgical Hospital (another entity controlled by Dr. Kibirige) for engaging in another type of billing scheme that caused Aetna to overpay millions of dollars on healthcare benefit claims, which Humble submitted with false and grossly inflated charges while hiding the fact that Humble paid kickbacks to physicians who improperly referred patients to Humble in violation of Texas law.

6. Humble and its owners must be stopped from continuing their fraudulent billing schemes against healthcare payors like Medicare and Aetna. Therefore, Aetna urges this Court to grant its pending motions for judgment or cross-motion for summary judgment at its earliest possible convenience and hold a hearing as it determines is necessary.

Respectfully submitted,

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CERTIFICATE OF SERVICE

On June 10, 2015, the foregoing document was filed with the clerk of the court for the U.S. District Court, Southern District of Texas, using the electronic case filing system of the Court. The electronic case filing system sent a “Notice of Electronic Filing” to the attorneys of record who have consented in writing to accept this Notice as service of this document by electronic means.

s/ Dena Palermo

Dena Palermo